

MAINE STATE LEGISLATURE

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STATE OF MAINE
129TH LEGISLATURE
FIRST REGULAR SESSION



Summaries of bills, adopted amendments and laws enacted or finally passed

**JOINT STANDING COMMITTEE ON HEALTH COVERAGE,
INSURANCE AND FINANCIAL SERVICES**

August 2019

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LEGISLATIVE DIGEST OF BILL SUMMARIES AND ENACTED LAWS

This *Legislative Digest of Bill Summaries and Enacted Laws* contains summaries of all LDs and adopted amendments and all laws enacted or finally passed during the First Regular Session of the 129th Maine Legislature.

The *Digest* is arranged alphabetically by committee and within each committee by Legislative Document (LD) number. The committee report(s), prime sponsor and lead co-sponsor(s), if designated, are listed below each LD title. All adopted amendments are summarized and listed by paper number. A subject index is included with each committee. An appendix provides a summary of relevant session statistics.

Final action on each LD is noted to the right of the LD title. The following describes the various final actions.

CARRIED OVER..... carried over to a subsequent session of the Legislature
CON RES XXX..... chapter # of constitutional resolution passed by both houses
CONF CMTE UNABLE TO AGREE..... Committee of Conference unable to agree; legislation died
DIED BETWEEN HOUSES..... House & Senate disagreed; legislation died
DIED IN CONCURRENCE..... defeated in each house, but on different motions; legislation died
DIED ON ADJOURNMENT..... action incomplete when session ended; legislation died
EMERGENCY..... enacted law takes effect sooner than 90 days after session adjournment
FAILED, EMERGENCY ENACTMENT or FINAL PASSAGE..... emergency failed to receive required 2/3 vote
FAILED, ENACTMENT or FINAL PASSAGE..... failed to receive final majority vote
FAILED, MANDATE ENACTMENT..... legislation proposing local mandate failed required 2/3 vote
HELD BY GOVERNOR..... Governor has not signed; final disposition to be determined at subsequent session
LEAVE TO WITHDRAW..... sponsor's request to withdraw legislation granted
NOT PROPERLY BEFORE THE BODY..... ruled out of order by the presiding officer; legislation died
INDEF PP..... indefinitely postponed; legislation died
ONTP, ACCEPTED, MAJORITY, MINORITY or REPORT X... ought-not-to-pass report accepted; legislation died
P&S XXX..... chapter # of enacted private & special law
PUBLIC XXX..... chapter # of enacted public law
RESOLVE XXX..... chapter # of finally passed resolve
VETO SUSTAINED..... Legislature failed to override Governor's veto

The effective date for non-emergency legislation enacted in the First Regular Session of the 129th Legislature is Thursday, September 19, 2019. The effective date for legislation enacted as an emergency measure may be found in the enacted law summary for that legislation.

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individual; and any practice or treatment that facilitates an individual's coping, social support or identity exploration and development, including any therapeutic intervention that is neutral with regard to sexual orientation or gender identity, and that seeks to prevent or address unlawful conduct or unsafe sexual practices, as long as the counseling does not seek or claim to change the individual's sexual orientation or gender identity.

The law prohibits MaineCare reimbursement for conversion therapy administered to an individual who is under 18 years of age.

Public Law 2019, chapter 165 also includes a statement of legislative findings and intent.

LD 1047 An Act To Prohibit Consideration of Naloxone Purchases in Life Insurance Underwriting

PUBLIC 203

| <u>Sponsor(s)</u> | <u>Committee Report</u> | <u>Amendments Adopted</u> |
|-----------------------|-------------------------|---------------------------|
| SANBORN H TEPLER D | OTP-AM ONTP | S-106 |

This bill prohibits a denial or limitation of coverage or an increase in insurance premiums under a life insurance policy based on the fact that an individual has been issued a prescription for naloxone or has purchased naloxone.

Committee Amendment "A" (S-106)

This amendment is the majority report and replaces the bill. The amendment prohibits a denial or limitation of coverage or an increase in insurance premiums under a life insurance policy based on the fact that an individual has been issued a prescription for naloxone hydrochloride or has purchased naloxone hydrochloride. The amendment also provides an exception to the prohibition when the individual has a demonstrated history of opioid use disorder.

Enacted Law Summary

Public Law 2019, chapter 203 prohibits a denial or limitation of coverage or an increase in insurance premiums under a life insurance policy based on the fact that an individual has been issued a prescription for naloxone hydrochloride or has purchased naloxone hydrochloride. The law provides an exception to the prohibition when the individual has a demonstrated history of opioid use disorder.

LD 1072 An Act To Promote Workforce Education on Alzheimer's Disease and Dementia

ONTP

| <u>Sponsor(s)</u> | <u>Committee Report</u> | <u>Amendments Adopted</u> |
|------------------------|-------------------------|---------------------------|
| CRAVEN M GRATWICK G | ONTP | |

This bill requires health care practitioners to disclose a diagnosis of Alzheimer's disease or dementia to an authorized representative or a family or household member except for a person that is expressly prohibited by the individual diagnosed. The health care practitioner making the diagnosis must also provide information regarding care planning services, including assistance understanding the diagnosis, and medical and nonmedical options for treatment, services and supports and information on how to access those options.

The bill requires that by January 1, 2023 every hospital must have a policy regarding the recognition and management of patients with Alzheimer's disease and dementia within that hospital and have the policy on file. The hospital must consult with the Department of Health and Human Services and statewide organizations with expertise in the field of Alzheimer's disease and dementia and include relevant portions of the federal Department of Health and Human Services, Centers for Disease Control and Prevention "Healthy Brain Initiative" publication and

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any succeeding plans and the state plan regarding Alzheimer's disease and related dementias in Maine developed by the Department of Health and Human Services.

The bill also requires continuing education requirements to be adopted by the Board of Licensure in Medicine, the Board of Osteopathic Licensure and the State Board of Nursing that relate to diagnosis, behavioral symptoms, respectful and effective communication, safety, signs of abuse and neglect and identifying signs of self-neglect by persons living alone with Alzheimer's or dementia. It also requires physician assistants to receive the same continuing education.

The bill also requires the Department of Health and Human Services to provide four hours of education and training to all employees of adult protective services at the beginning of employment.

LD 1082 An Act To Provide for Alternative Pain Treatment before Treatment with Opioids ONTP

| <u>Sponsor(s)</u> | <u>Committee Report</u> | <u>Amendments Adopted</u> |
|------------------------|-------------------------|---------------------------|
| JACKSON T STANLEY S | ONTP | |

This bill prohibits an individual licensed to prescribe opioid medication from prescribing opioid medication to a patient who does not have an active prescription for opioid medication unless the patient has completed 24 sessions of alternative pain treatment. This bill exempts from this requirement patients who have pain associated with cancer treatment, palliative care in conjunction with a serious illness, end-of-life and hospice care, medication-assisted treatment for substance use disorder and other circumstances determined in rule by the Department of Health and Human Services. This bill requires an individual licensed to prescribe opioid medication to discuss alternative pain treatment with a patient who has an active prescription for opioid medication. This bill also provides that a referral from an individual licensed under the Maine Revised Statutes, Title 32 whose scope of practice includes prescribing opioid medication is not required for coverage for alternative pain treatment and that the cost of covered alternative pain treatment may not exceed the cost of a visit to a primary care provider.

LD 1085 An Act To Ensure That Maine Residents Have Adequate and Affordable Access to Health Care CARRIED OVER

| <u>Sponsor(s)</u> | <u>Committee Report</u> | <u>Amendments Adopted</u> |
|------------------------|-------------------------|---------------------------|
| SANBORN L HUBBELL B | | |

This bill is a concept draft pursuant to Joint Rule 208. This bill proposes to ensure that consumer protections in health insurance are maintained under state law.

This bill was carried over to any special or regular session, or both, of the 129th Legislature by joint order, H.P. 1322.

LD 1089 An Act To Ban Discretionary Clauses in Disability Income Insurance Policies PUBLIC 179

| <u>Sponsor(s)</u> | <u>Committee Report</u> | <u>Amendments Adopted</u> |
|-------------------|-------------------------|---------------------------|
| CARPENTER M | OTP-AM | S-89 |